

TC 3 8 6 4

POSITION	INITIALS	ID NO.	DATE
FEES DETERMINATION	MILLER, D.		10-11
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	TM	JCB 64	10/24/10

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) Canceled
 ÷ Restricted

N	Non-elected
I	Interference
A	Appeal
O	Objected

Claim	Date
Original	1 9 8 2 7 1 1
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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135

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